



Donald A. Neel
Board Chair

Luis B. Perez, LCSW
President & CEO

Testimony of the Mental Health Association of Connecticut (MHAC)

Before the Insurance and Real Estate Committee

March 17, 2015

Regarding

**S.B. No. 1085 (Raised): AN ACT CONCERNING HEALTH INSURANCE COVERAGE FOR
MENTAL OR NERVOUS CONDITIONS**

Senator Crisco, Representative Megna, Senator Kelly, Representative Sampson, and distinguished members of the Insurance and Real Estate Committee, I am Wendi Fralick, Senior Director of Advocacy with the Mental Health Association of Connecticut. As a statewide advocacy organization and direct service provider, the Mental Health Association of Connecticut assists people with mental illnesses and co-occurring disorders live integrated, healthy lives in our communities. To this end, I am here today to express our support of **S.B. No. 1085 (Raised): AN ACT CONCERNING HEALTH INSURANCE COVERAGE FOR MENTAL OR NERVOUS CONDITIONS.**

As providers of mental health services, we are well aware of the discrepancies between public health insurance and commercial insurance in Connecticut. People with mental health conditions who have commercial insurance often lack access to covered services and supports as compared to people with public insurance, are restricted in the number of days they can seek in-patient mental health services, are limited in the number of psychiatrist sessions that are covered annually, and can have expenditure limits resulting in patients being responsible for all service costs once limits are exceeded. Furthermore, people with commercial insurance can be denied coverage for mental health services altogether on the basis that the service is not deemed "medically necessary" by the insurance provider.

This great divide between public and commercial insurance has been termed the "coverage gap."

Access to and coverage of mental health services promotes long-term health and wellness in our communities and reductions in the most costly medical responses, including emergency room visits, hospital stays and institutional care. S.B. No. 1085 clarifies the scope of coverage that should be provided by state-regulated commercial insurers. Furthermore, it promotes consistency and prevents cost-shifting to state programs, thus, assuring access to the most appropriate services regardless of the insurance provider.

Specifically, S.B. No. 1085 ensures that commercial individual and group insurance covers services designed to treat mental and nervous conditions, including psychiatric inpatient and outpatient care, partial hospitalization and intensive outpatient services, extended day treatment, rehabilitation services in group homes and community-based settings, Emergency Mobile Psychiatric Services, and several other service options. The resulting clarification better aligns public and commercial insurance coverage, increases access to care, and minimizes the confusion policy holders often face in determining what is covered, which is a barrier for people needing services to seek care.

It is our hope that S.B. No. 1085 will positively impact the overall healthcare system in Connecticut and, thus, promote advancements toward access to recovery-oriented services and achievement of health and wellness for all residents. We ask that you kindly move this legislation forward this legislative session.

Thank you for your time and consideration.